2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M06000002933

Entity Name: ALLEN, MOONEY & BARNES INVESTMENT ADVISORS, LLC

FILED Apr 22, 2008 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
Cullent Finicipal Flace Of Business.	New Fillicipal Flace Of Dusiliess.

2930 KERRY FOREST PARKWAY, SUITE 202 318 N. CALHOUN STREET TALLAHASSEE, FL 32309 TALLAHASSEE, FL 32301

Current Mailing Address: New Mailing Address:

2930 KERRY FOREST PARKWAY, SUITE 202 318 N. CALHOUN STREET TALLAHASSEE, FL 32309 TALLAHASSEE, FL 32301

FEI Number: 74-3070313 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

BARNES, TRAVIS JR
2930 KERRY FOREST PARKWAY, SUITE 202
TALLAHASSEE, FL 32309 US

BARNES, TRAVIS JR
318 N. CALHOUN STREET
TALLAHASSEE, FL 32301 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: 04/22/2008

Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES:

Title: MGRM () Delete Title: () Change () Addition

 Name:
 ALLEN, M. H.
 Name:

 Address:
 135 S. MADISON ST
 Address:

 City-St-Zip:
 THOMASVILLE, GA 31799
 City-St-Zip:

Title: MGRM () Delete Title: () Change () Addition

 Name:
 MOONEY, RICHARD
 Name:

 Address:
 135 S. MADISON ST
 Address:

 City-St-Zip:
 THOMASVILLE, GA 31799
 City-St-Zip:

Title: MGRM () Delete Title: MGRM (X) Change () Addition

Name:BARNES, TRAVISName:BARNES, TRAVISAddress:2930 KERRY FOREST PARKWAY, SUITE 202Address:318 N. CALHOUN STREET

Address: 2930 KERRY FOREST PARKWAY, SUITE 202 Address: 318 N. CALHOUN STREET City-St-Zip: TALLAHASSEE, FL 32309 City-St-Zip: TALLAHASSEE, FL 32301

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: STAN BARNES MM 04/22/2008